

GOODIN, MACBRIDE, SQUERI, RITCHIE & DAY, LLP
ROBERT A. GOODIN, State Bar No. 061302
FRANCINE T. RADFORD, State Bar No. 168269
505 Sansome Street, Suite 900
San Francisco, California 94111
Telephone: (415) 392-7900
Facsimile: (415) 398-4321

PILLSBURY WINTHROP SHAW PITTMAN LLP
THOMAS V. LORAN III, State Bar No. 95255
JOANNE H. KIM, State Bar No. 221525
50 Fremont Street
Post Office Box 7880
San Francisco, CA 94120-7880
Telephone: (415) 983-1000
Facsimile: (415) 983-1200

Attorneys for Amicus Curiae Common Sense Media

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA
SAN JOSE DIVISION

VIDEO SOFTWARE DEALERS and
ENTERTAINMENT SOFTWARE
ASSOCIATION,

Plaintiffs,

v.

ARNOLD SCHWARZENEGGER, in his
official capacity as Governor of the State of
California; BILL LOCKYER, in his official
capacity as Attorney General of the State of
California; GEORGE KENNEDY, in his
official capacity as Santa Clara County
District Attorney; RICHARD DOYLE, in his
official capacity as City Attorney for the City
of San Jose, and ANN MILLER RAVEL, in
her official capacity as County Counsel for
the County of Santa Clara.

Defendants.

No. C 05 4188 RMW RS

**DECLARATION OF THOMAS N.
ROBINSON, M.D., M.P.H.**

Date: May 12, 2006

Time: 9:00 a.m.

Courtroom: 6

Before the Honorable Ronald M. Whyte

1 I, Thomas N. Robinson, declare:

2 1. I am an Associate Professor of Pediatrics and of Medicine, in the Division
3 of General Pediatrics and the Stanford Prevention Research Center at Stanford University School
4 of Medicine, and Director of the Center for Healthy Weight at Lucile Packard Children's Hospital
5 at Stanford. I make this declaration in opposition to plaintiffs' motion for summary judgment. I
6 know the following facts of my own knowledge, and if called as a witness, could and would
7 testify competently thereto.

8 2. I received my B.S. and M.D. from Stanford University and my M.P.H. in
9 Maternal and Child Health from the University of California, Berkeley. I completed my
10 internship and residency in Pediatrics at Children's Hospital, Boston and Harvard Medical School,
11 and then returned to Stanford for post-doctoral training as a Robert Wood Johnson Clinical
12 Scholar. I joined the faculty at Stanford in 1993, was appointed Assistant Professor in 1996, and
13 promoted to Associate Professor with tenure in 2003. I was a Robert Wood Johnson Foundation
14 Generalist Physician Faculty Scholar, am a member of the Institute of Medicine's Committees on
15 Prevention of Obesity in Children and Adolescents and Progress in Preventing Childhood
16 Obesity, and am Principal Investigator on numerous prevention studies funded by the National
17 Institutes of Health. I am also Board Certified in Pediatrics, a fellow of the American Academy
18 of Pediatrics, and practice General Pediatrics at Lucile Packard Children's Hospital at Stanford.

19 3. I co-authored a study titled "Effects of Reducing Children's Television
20 and Video Game Use on Aggressive Behavior" (Robinson, T., Wilde, M., Navracruz, L., Haydel,
21 F., Varady, A.), published in January 2001 in *Archives of Pediatrics and Adolescent Medicine*
22 The abstract for this study summarized it as follows: "An intervention to reduce television,
23 videotape and video game use decreases aggressive behavior in elementary schoolchildren. These
24 findings support the causal influences of these media on aggression and the potential benefits of
25 reducing children's media use."

26 4. The study is described in the layman's terms in paragraphs 5 through 7.

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Case No. C 05 4188 RMW RS

DECLARATION OF THOMAS N. ROBINSON, M.D., M.P.H.

1 5. Using a randomized, controlled experimental design our research team
2 studied third and fourth grade students in two matched elementary schools. The two schools were
3 randomly chosen to be either an experimental intervention school or a control (comparison)
4 school. When the study began, data were collected on the levels of aggressiveness for each group
5 using the following four measures: peers' assessment of aggressiveness; parent reports of
6 aggressiveness; playground observations of aggressive behavior; and the participants' perceptions
7 that the world is 'mean and scary.'

8 6. After these data were collected, the third and fourth graders in the
9 experimental group (one school) received a media reduction curriculum from their regular
10 classroom teachers, where they received training in school about self-monitoring their media use,
11 and reducing the amount of time they spent watching television and videotapes and playing video
12 games. The control group (the other school) received no intervention.

13 7. Approximately eight months after the study began, our research team
14 repeated the aggressiveness measurements. Compared to children in the control group, the
15 children in the experimental group that received the curriculum consequently reduced their media
16 use, and exhibited statistically significant reductions in the primary measure of aggressive
17 behavior, peer ratings of aggression, and in directly observed acts of verbal aggression on the
18 playground. Differences in other secondary measures, directly observed physical aggression on
19 the playground, parent reports of aggression and perceptions of a mean and scary world, were not
20 statistically significant but all were in the same direction (decreased in the group that received the
21 curriculum compared to the control group).

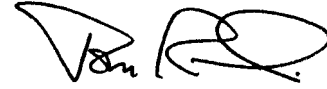
22 8. In the article, we, the authors, noted that "because the intervention targeted
23 reduction of media use alone, without substituting alternative behaviors or activities, these results
24 are also additional evidence for the causal effects of the media on children's aggressive
25 behavior."

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1 I declare under penalty of perjury under the laws of the State of California that the
2 foregoing is true and correct. Executed on April 17, 2006 at Atlanta, Georgia.

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Thomas N. Robinson, M.D., M.P.H.

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